				U.Ş.	Patent and T	Approved for use t	I.S. DEPARTME	ENT OF COMME
Under the Paperw	ork Reduction Act o	1995, no person	are requi	red to respond to a co		ormation unless it		OMB control nu
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nun		10/720,150-Conf. #4305		
FEE TRANSMITTAL			Filing Date		November 25, 2003			
			First Named Inventor		Jong Seok KIM			
For FY 2008			Examiner Name		R. R. Patel			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1792		
TOTAL AMOUNT OF PAYMENT (\$) 1		(\$) 1,050.0	0	Attorney Docket No.		0465-1082P		
METHOD OF PAYME	ENT (check all t	hat apply)						
x Deposit Account D	eposit Account Numb		Nor	Ш.	please identif	Birch, Stewa	art, Kolasch & E	Birch, LLP
x Charge fee	(s) indicated be	low		Charg		licated below,		ne filing fee
X Charge any fee(s) unde	/ additional fee(: er 37 CFR 1.16 a	s) or underpay and 1.17	ments o	f x Credit	any overpa	ayments		
FEE CALCULATION								
1. BASIC FILING, SEAR		IINATION FEE G FEES		ARCH FEES	EXAMIN	ATION FEES	3	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	aid (\$)
Utility	310	155	510	255	210	105	10001	
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES				-				Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim		g Reissues)					210	105
ultiple dependent claims						370	185	
19 - 20 =	0 x 5	ee (\$) 60.00 =		old (\$) .00		ultiple Depend e (\$)	ent Claims Fee Paid (\$	1
HP = highest number of total Indep. Claims Ext		ee (\$)		Paid (\$)	_			-
HP = highest number of indep				.00				
<ol> <li>APPLICATION SIZE F         If the specification and listings under 37 CF sheets or fraction the     </li> </ol>	drawings excee R 1.52(e)), the	application siz	e fee du	e is \$260 (\$130 f				1
Total Sheets	Extra Sheets			dditional 50 or frac			Fee F	Paid (\$)
- 100 = . 4. OTHER FEE(S)		50 =		(round up to a who	le number)	×	Fees	Paid (\$)
Non-English Specific								
Other (e.g., late filing	surcharge): 12	53 Extension	for res	sponse within th	ird month		1,0	50.00
SUBMITTED BY	100	2 /						
Signature Jame	o (. Ella	,4		Registration No. (Attorney/Agent)	39,538	Telephone	(703) 205	5-8000
Name (Print/Type) µames	T. Eller, Jr.	1				Date	July 8, 2	2008